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PTO/SB/01 (03-01)

Approved for use through 10/31/2002. OMB 0651-0032

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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

☐ Declaration Submitted with Initial Filing OR ☒ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	96700/667
First Named Inventor	Maureen J. Charron
COMPLETE IF KNOWN	
Application Number	09 / 886,954
Filing Date	June 21, 2001
Group Art Unit	TBA
Examiner Name	TBA

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

NOVEL GLUCOSE TRANSPORTER/SENSOR PROTEIN AND USES THEREOF

(Title of the Invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) 06/21/2001 as United States Application Number or PCT International

Application Number 09/886,954 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

[Page 1 of 2]

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to: <input type="checkbox"/>		Customer Number or Bar Code Label	<input type="checkbox"/>		OR <input checked="" type="checkbox"/>	Correspondence address below	
Name Craig J. Arnold, Esq.							
Address Amster, Rothstein & Ebenstein							
City New York				State NY		ZIP 10016	
Country United States			Telephone (212) 697-5995			Fax (212) 286-0854	
<p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.</p>							
NAME OF SOLE OR FIRST INVENTOR :				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any]) Maureen J.				Family Name or Surname Charron			
Inventor's Signature <i>Maureen J. Charron</i>				Date 10/18/01			
Residence: City Flushing			State NY		Country US		Citizenship US
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City Flushing			State NY		ZIP 11358		Country US
NAME OF SECOND INVENTOR:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any]) Ellen B.				Family Name or Surname Katz			
Inventor's Signature <i>Ellen B. Katz</i>				Date 10/18/01			
Residence: City Port Washington			State NY		Country US		Citizenship US
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City Port Washington			State NY		ZIP 11050		Country US
<input type="checkbox"/> Additional inventors are being named on the ____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.							

Please type a plus sign (+) inside this box → ☐

PTO/SB/81 (02-01)

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**POWER OF ATTORNEY OR
AUTHORIZATION OF AGENT**

Application Number	09/886,954
Filing Date	June 21, 2001
First Named Inventor	Maureen J. Charron
Title	NOVEL GLUCOSE TRANS...
Group Art Unit	TBA
Examiner Name	TBA
Attorney Docket Number	96700/667

I hereby appoint:

☐ Practitioners at Customer Number

OR

☒ Practitioner(s) named below:

Place Customer
Number Bar Code
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Name	Registration No.	Name	Registration No.
Morton Amster	16,677	Anthony F. Lo Cicero	29,403
Michael J. Berger	25,829	Ira E. Silfin	33,785
Daniel Ebenstein	24,932	Neil M. Zipkin	27,476
Kenneth P. George	30,259	Craig J. Arnold	34,287
Philip H. Gottfried	25,871	Elie Gendloff	44,704
Abraham Kasdan	32,997		

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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I am the:

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☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name

Maureen J. Charron

Signature

Maureen J. Charron

Date

10/18/01

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of 2 forms are submitted.

Please type a plus sign (+) inside this box → ☐

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SIGNATURE of Applicant or Assignee of Record

Name

Ellen B. Katz

Signature

Ellen B. Katz

Date

10/18/01

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